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				L					(Date)	
APPLICATION NO.		FILING DATE	FIRST NAMED	INVENTO	₹	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/813,029		03/31/2004	Ok-Kyun	g Cho	o 1021.		43719X00		3830	
TITLE OF INVENT	ION: BLOOD S	UGAR LEVEL MEAS	SURING APPARATUS	3						
APPL. TYPE	APPL. TYPE SMALL ENTITY ISSUE FEE DUE			JE PR	PREV. PAID ISSUE FEE		TOTAL FEE (S) DUE		DATE DUE	
Nonprovisional	NO	\$1400	\$300		\$0		\$1700		08/17/2007	
EXAMINER			ART UNIT CLAS		.ASS-SI	JBCLASS				
WINAKUR, ERIC FRANK			3768	600-316000		16000				
Change of correspon CFR 1.363).	ndication of "Fee Address	2. For printi	ng on the	patent front page,	list					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.					(1) the names of up to 3 registered patent attorneys 1 ANTONELLI, TERRY, STOUT & KRAUS, LLP.					
agents OR, alternatively,				Or agents OR, alternatively, (2) the name of single firm (having as a						
Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of Customer				member a registered attorney or agent)						
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HITACHI, LTD.			TOKYO, JAPAN							
Please check the approp	riate assignee catego	ory or categories (will not be	printed on the patent):	Individual	☒	Corporation or o	ther private group entity		Government	
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overpayment, to Deposit Account Number <u>01-2135</u> .										
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Authorized Signa	iture /AI	an E. Schiavelli	I	Date:	JUNE 2	7, 2007				
Typed or printed	name Alan E.	Schiavelli		Registra	tion No.	<u>32,087</u>				

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